## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0076

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hours per response . . . 16.00



**TEMPORARY** FORM D

OCT 0 2 2008

NOTICE OF SALE OF SECURITIES THOMSON REUTERS

**SECTION 4(6), AND/OR** TED OFFEDING EXEMPTION | Precessire

UNIF	JRM LIMITED OFFERING EXE	METION	980/10H
Name of Offering ( check if this is an amenda Luminous Capital Special Situation	s Fund, L.P.		SEP 2 4 2008
Filing Under (Check box(es) that apply): Rule 50-	4 🔲 Rule 505 🖾 Rule 506 🔲 S	Section 4(6) ULOE	
Type of Filing: New Filing  Amendment			Weshington, DC
	A. BASIC IDENTIFICATION DAT	`A	- 103 -
1. Enter the information requested about the issuer			196
Name of Issuer ( check if this is an amendment a	nd name has changed, and indicate change.)		
Luminous Capital Special Situation	s Fund, L.P.		
Address of Executive Offices (Number and Street, C	ity, State, Zip Code)	Telephone Number (Including Area	(Code)
2049 Century Park East, Suite 320,	Los Angeles, CA 90067	(424) 204-0871	
Address of Principal Business Operations (Number a	nd Street, City, State, Zip Code)	Telephone Number (Including Area	(Code)
(if different from Executive Offices)		<u> </u>	
Pooled investment vehicles			
Type of Business Organization	<u>_</u>		
corporation	☐ limited partnership, already formed	other (please specify):	
business trust	☐ limited partnership, to be formed	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Actual or Estimated Date of Incorporation or Organiz	<u> </u>		stimated
Jurisdiction of Incorporation or Organization: (Enter	two-letter U.S. Postal Service abbreviation for	or State; D E	

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239,500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exception under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC

Filing Fee: There is no federal filing fee.

CN for Canada; FN for other foreign jurisdiction).

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (9-08)

	A. BASIC IDENTIFI	CATION DATA						
2. Enter the information requested for the	following:							
• Each promoter of the issuer, if the issuer has been organized within the past five years;								
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer:								
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and								
<ul> <li>Each general and managing partner of partnership issuers.</li> </ul>								
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)  Luminous Capital Management L	.LC	-						
Business or Residence Address (Number and		<del></del>						
c/o Luminous Capital Special Situ	ations Fund, L.P., 2049 Ce	ntury Park East, Suite 32	20, Los Angeles,	CA 90067				
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	□ General and/or Managing Partner				
Full Name (Last name first, if individual)	•		<del></del>	<del></del>				
Luminous Capital Holdings, LLC	(Sole Member of General	Partner)						
Business or Residence Address (Number and c/o Luminous Capital Special Situ	Street, City, State, Zip Code; ations Fund, L.P., 2049 Ce	) ntury Park East, Suite 32	20, Los Angeles,	CA 90067				
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, if individual)	· · · · · · · · · · · · · · · · · · ·							
Hou, David - Member of Lumino	us Capital Holdings, LLC (	Member of Luminous C	apital Holdings	LLC)				
Business or Residence Address (Number and c/o Luminous Capital Special Situ	Street, City, State, Zip Code ations Fund, L.P., 2049 Ce	) ntury Park East, Suite 3:	20, Los Angeles	CA 90067				
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, if individual)	-							
Sear, Mark - Member of Lumino			apital Holdings	, LLC)				
Business or Residence Address (Number and c/o Luminous Capital Special Situ	Street, City, State, Zip Code attions Fund, L.P., 2049 Ce	) intury Park East, Suite 3:	20, Los Angeles	CA 90067				
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, if individual)  Zafran, Alan - Member of Lumin	ous Capital Holdings, LLC	(Member of Luminous	Capital Holding	s, LLC)				
Business or Residence Address (Number and c/o Luminous Capital Special Situ	Street, City, State, Zip Code	)						
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Skinner, Robert - Member of Lu	minous Capital Holdings, L	LLC (Member of Lumino	ous Capital Holo					
Business or Residence Address (Number and c/o Luminous Capital Special Situ	Street, City, State, Zip Code	)						
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director     □	General and/or Managing Partner				
Full Name (Last name first, if individual)  Ip, Kim - Member of Luminous (	Capital Holdings, LLC (Me	mber of Luminous Capi	tal Holdings, LI					
Business or Residence Address (Number and c/o Luminous Capital Special Situ	Street, City, State, Zip Code	)						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING														
i. Ha	s the iss	uer sold	, or does	the issu					investors in 2, if fil				Yes . □	No ⊠
2. What is the minimum investment that will be accepted from any individual?									. \$ <u>500,00</u>	<u>00.00</u> *				
	Yes No									No				
3. Does the offering permit joint ownership of a single unit?										. 🗆				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.														
Full Na	me (Last	name fi	rst, if ind	lividual)										
Busine	ss or Res	idence A	ddress (1	Number a	and Stree	t, City, St	ate, Zip (	Code)						
Name o	of Associ	ated Bro	ker or D	ealer		=						·		
States i	n Which	Person l	Listed Ha	s Solicite	ed or Inte	nds to Sc	licit Purc	hasers			•			States
									(FL)	[GA]	[HI]	[ID]	🗀 Ali	States
(AL)	(AK)	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE] [MD]	[DC] [MA]	[MI]	[MN]	[MS]	[MO]		
(IL)	[IN]	[IA]	[KS]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
(MT) [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[XT]	[UT]	(VT)	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
		<u> </u>	irst, if inc										•	
			<u> </u>											
Busine	ss or Res	idence A	Address (1	Number a	and Stree	t, City, S	tate, Zip (	Code)						
Name	of Assoc	ated Bro	ker or D	ealer										
							olicit Puro						🗖 Ali	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[17]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Name (Last name first, if individual)														
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
							olicit Pure							States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[Ml]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

<sup>\*</sup> Subject to waiver by General Partner.

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. En "none" or "zero". If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below securities offered for exchange and already exchanged.	the an	nounts of the
	Type of Security Aggregate Offering Price	Amo	ount Already Sold
	Debt\$\$	\$	
	Equity\$		
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$ 3	3,650,000.00
	Partnership Interests		
	Other (Specify)-		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ	<u> </u>
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchase aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Number Investors	d secu A Do	rities and the Aggregate Ilar Amount F Purchases
	A5	\$ 3	3,650,000.00
	Accredited Investors45	<u> </u>	
	Accredited Investors		
	Non-accredited Investors	<b>s</b>	
3.	Non-accredited Investors	\$ \$ he issu	er, to date, ir
3.	Non-accredited Investors	\$ \$ he issu ify secu	er, to date, in arities by type
3.	Non-accredited Investors	\$she issuify secu	er, to date, ir arities by type Illar Amount Sold
3.	Non-accredited Investors	\$she issuify secu	er, to date, ir urities by type Illar Amount Sold
3.	Non-accredited Investors	\$she issuify secu	er, to date, ir arities by type Illar Amount Sold
3.	Non-accredited Investors	\$she issuify secu	er, to date, ir urities by type Illar Amount Sold
	Non-accredited Investors	\$s he issu ify secu  Do  \$sss	er, to date, ir urities by type llar Amount Sold
	Non-accredited Investors	\$she issuify secuion Do \$sss offer secuion	er, to date, ir urities by type sllar Amount Sold
	Non-accredited Investors	\$she issuify security secur	er, to date, ir urities by type sllar Amount Sold
	Non-accredited Investors	\$s he issu ify secu  Do  \$ \$ \$ s offer conting	er, to date, in urities by type ellar Amount Sold
	Non-accredited Investors	\$she issuify secular poor ss soffer conting ss	er, to date, ir urities by type dlar Amount Sold ing, Exclude gencies. If the
	Non-accredited Investors	\$she issuify security security security security security sshe is offer security security sshe is offer security security sshe is offer security securit	er, to date, in urities by type ollar Amount Sold
	Non-accredited Investors	\$she issuify security security security security security sshe she issuify security sshe she issuify security security sshe she issuify security sshe she she she she she she she she she	er, to date, in urities by type selfar Amount Sold ing. Excluding Exclusion Excluding Exclusion Excluding Exclusion Excluding Exclusion Excluding Exclusion
	Non-accredited Investors	\$she issuify security security security security security ss	er, to date, in urities by type older Amount Sold ing. Exclude gencies. If the
	Non-accredited Investors	\$s he issu ify secu  Do  \$\$ \$s s offer: conting  \$\$ \$\$ \$\$ \$\$ \$\$	er, to date, in urities by type ollar Amount Sold ing. Exclude tencies. If the 125,000.00

5. Indicate below the amount of the adjusted gross proceeds to the amount for any purpose is not known, furnish an estimatisted must equal the adjusted gross proceeds to the issuer so	ate and check the box to the left o	f the estimate. The	e purposes shown. If total of the payments	
		Payments to Officers, Directors & Affiliates	Payments To Others	
Salaries and fees		□ \$	□ \$	
Purchase of real estate		<b>\$</b>	□ \$	
Purchase, rental or leasing and installation of machine	ery and equipment	□ <b>\$</b>	□ <b>\$</b>	
Construction or leasing of plant buildings and facilitie		<b>\$</b>	□ \$	
Acquisition of other businesses (including the value o offering that may be used in exchange for the assets o pursuant to a merger)	or securities of another issuer	□ \$	<b></b>	
Repayment of indebtedness		□ \$	□ \$	
Working capital		□ \$		
Other (specify): Investments in pooled investment		L \$	L	
• • • • • • • • • • • • • • • • • • • •	venicles			
		□ \$	<b>\$124,875,000</b>	
Column Totals			<b>\$124,875,000</b>	
Total Payments Listed (column totals added)		🛭 \$ <u>1:</u>	24,875,000	
D. FEDE	ERAL SIGNATURE		<u>.                                    </u>	
The issuer has duly caused this notice to be signed by the under following signature constitutes an undertaking by the issuer to request of its staff, the information furnished by the issuer to are	furnish to the U.S. Securities and Enymon-accredited investor pursuan	Exchange Commission to paragraph (b)(2)	on, upon written	
Issuer (Print or Type) Signa	túre	Date:		
Luminous Capital Special Situations Fund, L.P.		September 23, 2	008	
Name of Signer (Print or Type)				
	of Signer (Print or Type)			
kobert Skinner (on behalf of Luminous Capital loldings, LLC)  Member of Luminous Capital Management LLC, as General Partner				

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

